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	Substitute for Form PTO-876 Effective December 8, 2004							Application or Dockel Number 10/631,937				
A		LICATION AS FILED - (Column 1)			(Column 2)		SMALL ENTITY			.0	OR OTHER THA	
. FOR	·M	NUMBER FILED			MBER EXTRA	.]	RATE (1)		FEE (\$)			
7 CFR 1.16(a), (b), or (<u>e))</u>	ŅA		N/A			NA		150.00	_	RATE (
EARCH FEE 17 CFR 1 16(N, N), or (n	7))	N/A		N/A.		7	· N/A		\$250	-		300
XAMINATION FEE 17 CFR. 1.16(0), (0), or (0	V)	NA.	Α .		N/A		N/A		\$100	-	N/A N/A	\$50
OTAL CLAIMS FOR 1.18(II)		minus 20 =				1	X\$ 25			OR	VECO	\$200
DEPENDENT CLAH CFR 1.16(N)	us	minus 3 =		•		7	X100	<u> </u>	<u> </u>	٦ ٥,	X200	
PPLICATION SIZE E CFR 1.16(6))	ls \$250 addition	If the specification and dra sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			size fee due or each							
ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							+180=	1		1	+360=	+
the difference in col	umn 1 fs less t	hen zero.	enter 10° i	in column	1 2.		TOTAL			1	L	
•	CATION AS				•			L		J.	TOTAL	L
1 1011198 I	CLAIMS REMAINING AFTER MENOMENT	MINING FTER NOMENT		HEST MBER HOUSLY FOR	PRESENT EXTRA		SMALL RATE (\$)	ŕ	ONAL E (\$)		SMAL RATE (\$)	ADD TION FEE (
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Application Size Fe			<u></u>	3	19		X100 _			OR	X200	1
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	Column 1)			ımn 2)	(Column 3)	_						
	EMAINING AFTER MENDMENT		HIGH NUMI PREVIO PAID I	BER SUSLY	PRESENT EXTRA		RATE (\$)	TÌO	NAL (3)		RATE (\$)	-KDQA IANOIT
D7 CFR 1.16(II)		Minus	••		*		X\$ 25 _				X\$50	FEE (\$)
ndependent 37 CFR 1.18(h))		Minus	***		2	-	X100			OR .		
Application Size Fee	(37 CFR 1.10	5(e))		———. ———		-				OR 1	X200 _	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))							+180=	·····		OR	+360=	
	•	٠.				A	OTAL, OD'L FEE	-		D	TOTAL ADD'L FEE	
I the entry in column the Highest Numb the Highest Number he Highest Number	or Davisiasi	raid For	IN THIS S	PACE	less than 20, o	nter 📆	o.					

This collection of information is required by 97 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.